

Your Name: \_\_\_\_\_  
Your Address: \_\_\_\_\_  
Your City, State, ZIP: \_\_\_\_\_  
Your Telephone No: \_\_\_\_\_  
Representing ☐ Self (Without an Attorney) OR  
Attorney for ☐ Petitioner OR ☐ Respondent

## IN THE SUPERIOR COURT OF ARIZONA, MARICOPA COUNTY

In the Matter of (check one or both)  
The ☐ Guardianship ☐ Conservatorship of

PB No: \_\_\_\_\_  
**COURT ORDER REGARDING**

\_\_\_\_\_  
(Incapacitated person and/or Protected Person)

☐ Guardianship/Conservatorship  
☐ Guardianship  
☐ Conservatorship  
**OF AN ADULT**

**NOTICE: THIS IS AN IMPORTANT COURT ORDER THAT COULD AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY. IF YOU DO NOT UNDERSTAND IT, CONSULT AN ATTORNEY FOR LEGAL ADVICE.**

### FINDINGS OF THE COURT:

1. A sworn Petition for Termination and/or Discharge of a ☐ Guardianship/Conservatorship ☐ Guardianship ☐ Conservatorship for the above-captioned persons was filed by \_\_\_\_\_
2. Notice of the Petition was:  
☐ given as required by law  
☐ waived by all interested persons.  
OTHER: \_\_\_\_\_

### FINDINGS ABOUT TERMINATION OF GUARDIANSHIP AND/OR CONSERVATORSHIP:

1. ☐ The reason for this guardianship and/or conservatorship has ended because of:  
☐ Death of the person who was incapacitated on (date) \_\_\_\_\_ (attach death certificate);  
☐ Person who was incapacitated moved out of state on (date) \_\_\_\_\_  
to (location) \_\_\_\_\_;  
☐ Other (explain: \_\_\_\_\_)
2. ☐ The reason for the guardianship and/or conservatorship has not ended.

### IT IS THEREFORE ORDERED:

1. The guardianship/conservatorship of \_\_\_\_\_ ☐ IS ☐ IS NOT terminated.
2. The guardian and/or conservator is not discharged from all other duties by this order.

Done in open court this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
JUDGE OF THE SUPERIOR COURT